United S Middle	ourt ania Voluntary Petition			y Petition	
Name of Debtor (if individual, enter Last, First, I Jovine, Patricia E.	Name of Joint Debtor (Spouse) (Last, First, Middle):				
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): None	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):				
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 6222	N Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):				
Street Address of Debtor (No. and Street, City, a 615B South Thomas Ave. Edwardsville, PA	Street Address of Joint Debtor (No. and Street, City, and State				
,	ZIPCODE 18704				ZIPCODE
County of Residence or of the Principal Place of Luzerne	Business:	County of Re	sidence or of the Principal I	Place of Business:	
Mailing Address of Debtor (if different from stre	eet address):	Mailing Addr	ess of Joint Debtor (if diffe	rent from street add	dress):
	ZIPCODE	-			ZIPCODE
Location of Principal Assets of Business Debtor	(if different from street address a	bove):			ZIPCODE
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 26 of the United States Tay-Exempt Entity or A personal, family, or household				one box) etition for of a Foreign ding etition for of a Foreign	
Filing Fee (Check one box) Full Filing Fee attached Check one box: Chapter 11 Debtors Debtor is a small business as defined in 11 U.S.C. § 101(51D) Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Debtor is not a small business as defined in 11 U.S.C. § 101(51D) Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,343,300 (amount subject to adjustment 4/01/13 and every three years thereafter). Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.					J.S.C. § 101(51D) luding debts owed to subject to adjustment on
Statistical/Administrative Information		•			THIS SPACE IS FOR COURT USE ONLY
Debtor estimates that funds will be available for dist Debtor estimates that, after any exempt property is a distribution to unsecured creditors.		paid, there will be	no funds available for		
Estimated Number of Creditors 1-49 50-99 100-199 200-999	1000- 5,001- 5000 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000	
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 to \$1 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	\$50,000,001 to \$100 million	\$100,000,001 \$500,000,000 to \$500 to \$1 billion million		
million million million million million million stimated Liabilities 0 to \$50,001 to \$100,000 to \$500,001 \$1,000,001 \$10,000,001 \$500,000,001 \$500,000,001 \$100,000,001 \$500,000,001 More than 50,000 \$100,000 \$500,000 to \$1 to \$1 to \$10 to \$50 to \$100 to \$500 to \$1 billion \$1 billion million m					

B1 (Official F	orm 1) (4/10)		Page 2
Voluntary P (This page must	Petition be completed and filed in every case)	Name of Debtor(s): Patricia E. Jovine	
	All Prior Bankruptcy Cases Filed Within Last 8 Years (I	If more than two, attach additional sheet)	
Location Where Filed:	NONE	Case Number:	Date Filed:
Location Where Filed:	N.A.	Case Number:	Date Filed:
Pending P	Bankruptcy Case Filed by any Spouse, Partner	or Affiliate of this Debtor (If more th	an one, attach additional sheet)
Name of Debtor:	: NONE	Case Number:	Date Filed:
District:		Relationship:	Judge:
10K and 10Q) wi	Exhibit A d if debtor is required to file periodic reports (e.g., forms with the Securities and Exchange Commission pursuant to (d) of the Securities Exchange Act of 1934 and is requesting oter 11)	Exhib (To be completed if de whose debts are primar I, the attorney for the petitioner named in the fore the petitioner that [he or she] may proceed under States Code, and have explained the relief availal I further certify that I delivered to the debtor the states.	btor is an individual rily consumer debts) egoing petition, declare that I have informed chapter 7, 11, 12, or 13 of title 11, United ble under each such chapter.
Exhibit A	A is attached and made a part of this petition.	X /s/ Brian E. Manning Signature of Attorney for Debtor(s)	June 3, 2010 Date
	Fyhi	ibit C	
_	EXMI own or have possession of any property that poses or is alleged I Exhibit C is attached and made a part of this petition.		narm to public health or safety?
		nibit D	
<u> </u>	ted by every individual debtor. If a joint petition is filed, each	spouse must complete and attach a separate Ex	hibit D.)
E xhibit	t D completed and signed by the debtor is attached and made a	part of this petition.	
If this is a joint p	petition:		
Exhibit	t D also completed and signed by the joint debtor is attached at	nd made a part of this petition.	
	Information Dec	70 41 TO 14 . \$7	
		arding the Debtor - Venue ny applicable box)	
□	Debtor has been domiciled or has had a residence, princip immediately preceding the date of this petition or for a lo	pal place of business, or principal assets in this	
	There is a bankruptcy case concerning debtor's affiliate, g	general partner, or partnership pending in this Γ	District.
	Debtor is a debtor in a foreign proceeding and has its prin or has no principal place of business or assets in the Unite court] in this District, or the interests of the parties will be	ted States but is a defendant in an action or proc	ceeding [in federal or state
	Certification by a Debtor Who Resi (Check all ap	ides as a Tenant of Residential Prop	erty
	Landlord has a judgment for possession of debtor's reside	•	.)
	(Name of l	landlord that obtained judgment)	
	(Address	of landlord)	
	Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for		
	Debtor has included in this petition the deposit with the c period after the filing of the petition.	court of any rent that would become due during	the 30-day
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).	

B1 (Official Form 1) (4/10)	Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Patricia E. Jovine
	atures
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign
available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).	proceeding, and that I am authorized to file this petition. (Check only one box.)
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.
X /s/ Patricia E. Jovine	Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.
Signature of Debtor	X
organical of Boston	
×	(Signature of Foreign Representative)
Signature of Joint Debtor	
Telephone Number (If not represented by attorney)	(Printed Name of Foreign Representative)
June 3, 2010	
Date	(Date)
Signature of Attorney*	
X /s/ Brian E. Manning	Signature of Non-Attorney Petition Preparer
Signature of Attorney for Debtor(s)	I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation,
Printed Name of Attorney for Debtor(s)	and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and,
Law Offices of Brian E. Manning	3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition
Firm Name	preparers, I have given the debtor notice of the maximum amount before any
502 S. Blakely Street, Suite B Address	document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
Dunmore, PA 18512	1-1
570-558-1126 brianemanning@comcast.net	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number e-mail	Social Security Number (If the bankruptcy petition preparer is not an individual,
June 3, 2010 Date *In a case in which § 707(b)(4)(D) applies, this signature also constitutes a	state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.	Address
Signature of Debtor (Corporation/Partnership)	
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of honterproton actition proposed on officer principal recognition
X	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:
Printed Name of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
Title of Authorized Individual	A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

In re_	Patricia E. Jovine	Case No.
	Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the
applicable statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental
illness or mental deficiency so as to be incapable of realizing and making rational
decisions with respect to financial responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the
extent of being unable, after reasonable effort, to participate in a credit counseling
briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
_ · · · · · · · · · · · · · · · · · · ·

I certify under penalty of perjury that the information provided above is true and correct.

counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

5. The United States trustee or bankruptcy administrator has determined that the credit

Signature of Debtor:	/s/ Patricia E. Jovine	
	PATRICIA E. JOVINE	
Date:	June 3, 2010	

United States Bankruptcy Court

Middle District of Pennsylvania

In re	Patricia E. Jovine	Case No	
	Debtor	or	
		Chapter 7	

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

		IOUNIS SCHEDULEI	•	•	_
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 250,000.00		
B – Personal Property	YES	3	\$ 42,674.27		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 265,106.93	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	2		\$ 16,856.86	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 1,326.00
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 1,207.00
тот	ſ AL	14	\$ 292,674.27	\$ 281,963.79	

United States Bankruptcy Court Middle District of Pennsylvania

In re	Patricia E. Jovine	Debtor	 Case No.	
			Chapter	7

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$ 0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$ 0.00
Student Loan Obligations (from Schedule F)	\$ 0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$ 0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$ 0.00
TOTAL	\$ 0.00

State the Following:

Average Income (from Schedule I, Line 16)	\$ 1,326.00
Average Expenses (from Schedule J, Line 18)	\$ 1,207.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 0.00

State the Following:

State the 1 moving.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 15,106.93
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 16,856.86
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 31,963.79

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

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In re	Patricia E. Jovine	Case No.
	Debtor	(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C -Property Claimed as Exempt.

Former Residence 2126 Fountain Springs Dr. Henderson, NV 89074-1513	DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
2126 Fountain Springs Dr. Henderson, NV 89074-1513	Formenr Residence	JTWROS		250,000.00	265,106.93
Total > 250,000.00	2126 Fountain Springs Dr. Henderson, NV 89074-1513				
		Total	a1 >	250,000.00	

(Report also on Summary of Schedules.)

In re	Patricia E. Jovine	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Pocket Money In possession of the Debtor(s)		15.00
Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking Account In possession of the Debtor(s)		300.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	х			
4. Household goods and furnishings, including audio, video, and computer equipment.		Bedroom Set, Couch, Television In possession of the Debtor(s)		2,000.00
5. Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	х			
6. Wearing apparel.		Various Used Clothing In possession of the Debtor(s)		200.00
7. Furs and jewelry.		Necklace; Watch In possession of the Debtor(s)		50.00
8. Firearms and sports, photographic, and other hobby equipment.	х			
Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	х			
10. Annuities. Itemize and name each issuer.	х			

In re	Patricia E. Jovine	Case No
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	x			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Individual Retirement Account		33,559.27
Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14. Interests in partnerships or joint ventures. Itemize.	Х			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	х			
16. Accounts receivable.	х			
Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	х			
Other liquidated debts owing debtor including tax refunds. Give particulars.	х			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	Х			
Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	х			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	Х			
22. Patents, copyrights, and other intellectual property. Give particulars.	х			
23. Licenses, franchises, and other general intangibles. Give particulars.	х			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2002 Honda Oddesy In possession of the Debtor(s)		6,500.00

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In re	Patricia E. Jovine	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

26. Boats, motors, and accessories. 27. Aircraft and accessories. 28. Office equipment, furnishings, and supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.				
 27. Aircraft and accessories. 28. Office equipment, furnishings, and supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not 	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
 27. Aircraft and accessories. 28. Office equipment, furnishings, and supplies. 29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not 	х			
29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not	x			
used in business. 30. Inventory. 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not	x			
 31. Animals. 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not 	х			
 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not 	х			
particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not		Miniature Schnauzer In possession of the Debtor(s)		50.00
34. Farm supplies, chemicals, and feed.35. Other personal property of any kind not	x			
35. Other personal property of any kind not	x			
35. Other personal property of any kind not already listed. Itemize.	x			
	X			
		0 continuation sheets attached Total	ો 1	\$ 42,674.27

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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In re	Patricia E. Jovine	Case No
	Debtor	(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims	the	exemptions	to	which	debtor	is	entitled	under:
(Charle one be	· ·							

(C	heck one box)	
$ \sqrt{} $	11 U.S.C. § 522(b)(2)	☐ Check if debtor claims a homestead exemption that exceeds
	11 U.S.C. § 522(b)(3)	\$146,450*.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Individual Retirement Account	11 U.S.C. 522(d)(10)(E)	33,559.27	33,559.27
Pocket Money	11 U.S.C. 522(d)(5)	15.00	15.00
Checking Account	11 U.S.C. 522(d)(5)	300.00	300.00
Bedroom Set, Couch, Television	11 U.S.C. 522(d)(3)	2,000.00	2,000.00
Various Used Clothing	11 U.S.C. 522(d)(3)	200.00	200.00
Necklace; Watch	11 U.S.C. 522(d)(4)	50.00	50.00
2002 Honda Oddesy	11 U.S.C. 522(d)(2) 11 U.S.C. 522(d)(5)	3,450.00 3,050.00	6,500.00
Miniature Schnauzer	11 U.S.C. 522(d)(5)	50.00	50.00

^{*}Amount subject to adjustment on 4/1/13 and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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In re	Patricia E. Jovine	 Case No	
	Debtor		(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			Lien: First Mortgage					15,106.93
US Bank Home Mortgage P.O. Box 2005 Owensboro, KY 42304-0005	x		Security: Residence				265,106.93	7
			VALUE \$ 250,000.00					
ACCOUNT NO.			VALUE \$					
ACCOUNT NO.			VALUE \$	•				
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In re Patricia E. Jovine Debtor	, Case No (if known)
SCHEDULE E - CREDITORS HOLDING	, ,
	e of priority, is to be set forth on the sheets provided. Only holders of e boxes provided on the attached sheets, state the name, mailing ny, of all entities holding priority claims against the debtor or the
The complete account number of any account the debtor has with the debtor chooses to do so. If a minor child is a creditor, state the child's i "A.B., a minor child, by John Doe, guardian." Do not disclose the child's n	
If any entity other than a spouse in a joint case may be jointly liable entity on the appropriate schedule of creditors, and complete Schedule H-C both of them or the marital community may be liable on each claim by place Joint, or Community." If the claim is contingent, place an "X" in the column in the column labeled "Unliquidated." If the claim is disputed, place an "X" more than one of these three columns.)	cing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, in labeled "Contingent." If the claim is unliquidated, place an "X"
Report the total of claims listed on each sheet in the box labeled "S Schedule E in the box labeled "Total" on the last sheet of the completed sch	•
Report the total of amounts entitled to priority listed on each shee amounts entitled to priority listed on this Schedule E in the box labeled "To primarily consumer debts report this total also on the Statistical Summary of	
Report the total of amounts <u>not</u> entitled to priority listed on each amounts not entitled to priority listed on this Schedule E in the box labeled with primarily consumer debts report this total also on the Statistical Sumn Data.	
Check this box if debtor has no creditors holding unsecured priority cl. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below it	
Domestic Support Obligations	

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in

Wages, salaries, and commissions

11 U.S.C. § 507(a)(1).

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

In re Patricia E. Jovine	. Case No.
Debtor	(if known)
Certain farmers and fishermen	
Claims of certain farmers and fishermen, up to \$5,775* per farmer or fishern	nan, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
commo or commo and noncomor, up to \$60,770 per minut of noncom	initing and decision, as provided in 11 clinicity (contact)
Deposits by individuals	
Claims of individuals up to \$2,600* for deposits for the purchase, lease, or re	ental of property or services for personal, family, or household use.
that were not delivered or provided. 11 U.S.C. § 507(a)(7).	1 1 3
Taxes and Certain Other Debts Owed to Governmental Units	
Taxes, customs duties, and penalties owing to federal, state, and local govern	nmental units as set forth in 11 U.S.C. § 507(a)(8).
Commitments to Maintain the Capital of an Insured Depository Instit	ution
Claims based on commitments to the FDIC, RTC, Director of the Office of T	hrift Supervision Comptroller of the Currency or Roard of
Governors of the Federal Reserve System, or their predecessors or successors, to	
U.S.C. § 507 (a)(9).	
Claims for Death or Personal Injury While Debtor Was Intoxicated	
Claims for death or personal injury resulting from the operation of a motor	vehicle or vessel while the debtor was intoxicated from using
alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).	
* Amounts are subject to adjustment on 4/01/13, and every three years thereafte	er with respect to cases commenced on or after the date of
adjustment.	

____ continuation sheets attached

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In re	Patricia E. Jovine	Case No.	
_	Debtor	(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 7574 Capital One Bank (NC) P.O. Box 71083 Charlotte, NC 28272-1083			Incurred: Credit Card Last Used in 2009 Consideration: Credit card debt				6,924.07
ACCOUNT NO. 5823 Cardmember Service P.O. Box 15153 Wilmington DE 19886-5153			Incurred: Credit Card Last Used in 2009 Consideration: Credit card debt				9,026.52
ACCOUNT NO. CitiFinancial (NV) P.O. Box 6931 The Lakes, NV 88901-6931			Incurred: 2009 Consideration: Personal loan				759.99
ACCOUNT NO. Citifinancial (WB) 695 Kidder Stree, Suite 2 Wilkes-Barre, PA 18702-6938			Consideration: Personal loan				Notice Only
continuation sheets attached			:	Subt T	otal otal		\$ 16,710.58 \$

(Use only on last page of the completed Schedule F.)

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In re	Patricia E. Jovine		, Case No.	
		Debtor		(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 57SC			Incurred: 2009				
Legacy Village POA c/o Colonial Property Management P.O. Box 63275 Phoenix, AZ 85082-3275			Consideration: Association Dues				146.28
ACCOUNT NO.			Incurred: 2009				
NV Energy P.O. Box 30086 Reno, NV 89520-3086			Consideration: Utilities				Unknown
ACCOUNT NO.							
ACCOUNT NO.							
ACCOUNT NO.							
Sheet no. 1 of 1 continuation sheets attact to Schedule of Creditors Holding Unsecured	hed			Sub	tota	>	\$ 146.28
Nonpriority Claims				т	otal	>	\$ 16.856.86

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the

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In re	Patricia E. Jovine	Case No.	
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SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

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In re	Patricia E. Jovine	Case No.	
	Debtor		(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Patricia Szalmas 615 S. Thomas Ave., Apt. B Edwardsville, PA 18704	US Bank Home Mortgage P.O. Box 2005 Owensboro, KY 42304-0005

In re_	Patricia E. Jovine	Case			
	Debtor	(if known)			
	SCHEDULE I - CURRE	ENT INCOME OF INDIVIDUAL DEF	BTOR(S)		

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital DEPENDENTS OF DEBTOR AND SPOUSE					
Status: Widow	RELATIONSHIP(S): No dependents		AGE(S):		
Employment:	DEBTOR	S	POUSE		
Occupation	Retired				
Name of Employer					
How long employed					
Address of Employer			N.A.		
INCOME: (Estimate of average	or projected monthly income at time case filed)	DE	EBTOR	SPO	OUSE
Monthly gross wages, salary (Prorate if not paid month		\$	0.00	\$	N.A.
2. Estimated monthly overtime		\$	0.00	\$	N.A.
3. SUBTOTAL		\$	0.00	\$	N.A.
4. LESS PAYROLL DEDUCT	IONS				
a. Payroll taxes and social	security	\$	0.00	\$	N.A.
b. Insurance		\$	0.00	\$	N.A. N.A.
c. Union Duesd. Other (Specify:		\$ <u></u>	0.00	\$ \$	N.A.
u. Omer (Specify				T	
5. SUBTOTAL OF PAYROLL	DEDUCTIONS	\$	0.00	\$	N.A
6 TOTAL NET MONTHLY	ГАКЕ НОМЕ РАУ	\$	0.00	\$	N.A.
7. Regular income from operat	tion of business or profession or farm	\$	0.00	\$	N.A.
(Attach detailed statement)		¢	0.00	¢.	N.A.
8. Income from real property		\$ \$	0.00	\$	N.A.
9. Interest and dividends		Ψ		Ψ	
•	r support payments payable to the debtor for the	\$	0.00	\$	N.A.
debtor's use or that of deper 11. Social security or other go					
(Specify) Social Security	veriment assistance	\$	1,326.00	\$	N.A.
12. Pension or retirement incom	me		0.00	\$	N.A.
13. Other monthly income		\$ \$	0.00	\$	N.A.
(Specify)		\$	0.00	\$	N.A.
14. SUBTOTAL OF LINES 7	THROUGH 13	\$	1,326.00	\$	N.A.
15. AVERAGE MONTHLY IN	NCOME (Add amounts shown on Lines 6 and 14)	\$	1,326.00	\$	N.A.
16. COMBINED AVERAGE 1 from line 15)	MONTHLY INCOME (Combine column totals		\$	1,326.00	_
110III IIIIe 13)		(Report also on Summary	of Schedules	and, if app	olicable.

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

1/.	Describe any increase	of decrease in income reasonably	anticipated to occur	within the year following th	e ming of this document.	
	None					

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In re	Patricia E. Jovine	Case No.
_	Debtor	(if known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate so labeled "Spouse."	shadula of a	
	chedule of e	expenditures
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	0.00
a. Are real estate taxes included? YesNo		
b. Is property insurance included? YesNo		
2. Utilities: a. Electricity and heating fuel	\$	0.00
b. Water and sewer	\$	0.00
c. Telephone	\$	60.00
d. Other		0.00
3. Home maintenance (repairs and upkeep)		20.00
4. Food		200.00
5. Clothing		100.00
6. Laundry and dry cleaning		75.00
7. Medical and dental expenses		175.00
8. Transportation (not including car payments)		250.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.		100.00
10.Charitable contributions	\$	20.00
11.Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's		10.00
b. Life		0.00
c. Health		47.00
d.Auto	\$	75.00
e. Other	\$	0.00
12.Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other		0.00
14. Alimony, maintenance, and support paid to others		0.00
15. Payments for support of additional dependents not living at your home		0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)		0.00
17. Other Haicuts & Personal Items		75.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$	1,207.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of	this docume	ent:
None		
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	1,326.00
b. Average monthly expenses from Line 18 above	\$	1,207.00
c. Monthly net income (a. minus b.)	\$	119.00

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In re	Patricia E. Jovine	Case No.
	Debtor	(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UN	DER PENALTY OF PERJURY B	SY INDIVIDUAL DEBTOR
I declare under penalty of perjury that I have are true and correct to the best of my knowledge, infor	e read the foregoing summary and sc emation, and belief.	hedules, consisting of sheets, and that they
DateJune 3, 2010	Signature:	/s/ Patricia E. Jovine
	Signature:	Debtor:
Date	Signature:	Not Applicable
Date	Signature.	(Joint Debtor, if any)
	[If joint ca	ase, both spouses must sign.]
DECLARATION AND SIGNATURE OF	NON-ATTORNEY BANKRUPTCY PET	FITION PREPARER (See 11 U.S.C. § 110)
compensation and have provided the debtor with a copy of 110(h) and 342(b); and, (3) if rules or guidelines have be by bankruptcy petition preparers, I have given the debtor accepting any fee from the debtor, as required by that sec	of this document and the notices and en promulgated pursuant to 11 U.S.0 notice of the maximum amount before	C. § 110 setting a maximum fee for services chargeable
Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer		Security No. <i>y 11 U.S.C. § 110.</i>)
If the bankruptcy petition preparer is not an individual, state the nawho signs this document.	ume, title (if any), address, and social securi	ty number of the officer, principal, responsible person, or partne
Address		
X Signature of Bankruptcy Petition Preparer	 -	Date
Names and Social Security numbers of all other individuals who pre	pared or assisted in preparing this document	
If more than one person prepared this document, attach additional s	igned sheets conforming to the appropriate	Official Form for each person.
A bankruptcy petition preparer's failure to comply with the provisions of 18 U.S.C. § 156.	title 11 and the Federal Rules of Bankruptcy P.	rocedure may result in fines or imprisonment or both. 11 U.S.C. § 110
DECLARATION UNDER PENALTY OF	F PERJURY ON BEHALF OF A	CORPORATION OR PARTNERSHIP
I, the [the or an authorized agent of the partnership] of the in this case, declare under penalty of perjury that I have r shown on summary page plus 1), and that they are true an	ead the foregoing summary and sche	[corporation or partnership] named as debtor dules, consisting ofsheets (total
Date	Signature:	
	[Print o	r type name of individual signing on behalf of debtor.]
[An individual signing on behalf of a pa	rtnership or corporation must indicate pe	

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

In Re	Patricia E. Jovine	Case No.	
		(if known)	

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business



State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

SOURCE AMOUNT

2010 7956.00 **Social Security**

2009 15672.00 **Social Security**

None \boxtimes

3. Payments to creditors

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF **AMOUNT** AMOUNT STILL **PAYMENTS OWING** PAID

None \bowtie

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*)any payments that were made to a creditor on account of a domestic support obligation or as part of an alternativerepayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

*Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after date of adjustment.

NAME AND ADDRESS OF CREDITOR DATES OF **AMOUNT** AMOUNT STILL AND RELATIONSHIP TO DEBTOR **PAYMENTS PAID OWING**

None

 \boxtimes

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and Receiverships

None \boxtimes

Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF **ASSIGNEE**

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None \boxtimes

List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF **CUSTODIAN**

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None \boxtimes

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY DATE OF **GIFT**

DESCRIPTION AND VALUE OF GIFT

8. Losses

None \boxtimes

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Brian E. Manning Law Offices of Brian E. Manning 502 S. Blakely Street, Suite B Dunmore, PA 18512 March 24, 2010 1500.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

 \boxtimes

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND
ADDRESS OF
DIGITS OF ACCOUNT, LAST FOUR
DIGITS OF ACCOUNT NUMBER,
INSTITUTION
AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF AMOUNT OF

SETOFF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED

DATES OF OCCUPANCY

2126 Fountain Springs Dr. Henderson, NV 89074-1513

Same Name

2005-2009

16. Spouses and Former Spouses

None

 \boxtimes

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

 \boxtimes

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE ENVIRONMENTAL LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

 \boxtimes

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE ENVIRONMENTAL LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business



If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

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NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

June 3, 2010 Date

Signature of Debtor /s/ Patricia E. Jovine

PATRICIA E. JOVINE

0	continuation	cheets	attached
	continuation	SHEELS	anacheu

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)		
If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsibly partner who signs this document.			
Address			
X Signature of Bankruptcy Petition Preparer	Date		

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

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UNITED STATES BANKRUPTCY COURT Middle District of Pennsylvania

In re	Patricia E. Jovine		Case No.	
11110	D	ebtor	cuse ivo.	Chapter 7

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

PART A - Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1	
Creditor's Name: US Bank Home Mortgage Describe Property Securing Debt: Formenr Residence	
Property will be (check one):	
Surrendered	
If retaining the property, I intend to (check at least one):	
☐ Redeem the property	
Reaffirm the debt	
Other. Explain(for example, avoid lie	en
using 11 U.S.C. §522(f)).	
Property is (check one):	
☐ Claimed as exempt ☐ Not claimed as exempt	
D	
Property No. 2 (if necessary)	
Property No. 2 (if necessary) Creditor's Name: Describe Property Securing Debt:	
Creditor's Name: Describe Property Securing Debt:	
Creditor's Name: Describe Property Securing Debt: Property will be (check one): Surrendered Retained	
Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one):	
Creditor's Name: Describe Property Securing Debt: Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one):	
Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain	en
Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt	en
Property will be (check one): Surrendered Retained If retaining the property, I intend to (check at least one): Redeem the property Reaffirm the debt Other. Explain	en

B8 (Official Form 8) (12/08)

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for Each unexpired lease. Attach additional pages if necessary.)

$ Property\ No.\ 1 \qquad \textbf{NO Leased Property} $		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
		·
Property No. 2 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		☐ YES ☐ NO
Property No. 3 (if necessary)		
Lessor's Name:	Describe Leased Property:	Lease will be Assumed pursuant to 11 U.S.C. §365(p)(2)):
		□ YES □ NO
ocontinuation sheets attached (ij	f any)	•
	at the above indicates my intention as t property subject to an unexpired lease.	
Date: June 3, 2010	/s/ Patricia E. Jovine	
	Signature of Debtor	
	Signature of Joint Daht	

Desc

United States Bankruptcy Court Middle District of Pennsylvania

Debtor	(If known)
	CE TO CONSUMER DEBTOR(S) HE BANKRUPTCY CODE
Certification of [Non-Attorney]	Bankruptcy Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing btor the attached notice, as required by § 342(b) of the Bankrup	g the debtor's petition, hereby certify that I delivered to the stcy Code
rinted name and title, if any, of Bankruptcy Petition Preparer ddress:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person,
	or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
gnature of Bankruptcy Petition Preparer or officer, incipal, responsible person, or partner whose Social ecurity number is provided above.	
	of the Debtor d the attached notice, as required by § 342(b) of the Bankruptcy
ode	
Patricia E. Jovine rinted Names(s) of Debtor(s)	X /s/ Patricia E. Jovine Signature of Debtor Date
ase No. (if known)	XSignature of Joint Debtor, (if any) Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Middle District of Pennsylvania

In	re Patricia E. Jovine	Case No
	Faulcia E. Jovine	Chapter7
D	ebtor(s)	-
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FOR DEBTOR
an		ertify that I am the attorney for the above-named debtor(s) ng of the petition in bankruptcy, or agreed to be paid to me, for services plation of or in connection with the bankruptcy case is as follow s:
Fo	or legal services, I have agreed to accept	\$ 1,500.00
	ior to the filing of this statement I have received	
	alance Due	
	he source of compensation paid to me was:	· · · · · · · · · · · · · · · · · · ·
	☐ Other (specify)	
3. Th	he source of compensation to be paid to me is:	
0	Debtor Other (specify)	
4. Associa	I have not agreed to share the above-disclosed compensates of my law firm.	tion with any other person unless they are members and
of my la	I have agreed to share the above-disclosed compensation aw firm. A copy of the agreement, together with a list of the na	with a other person or persons who are not members or associates ames of the people sharing in the compensation, is attached.
5. Ir	n return for the above-disclosed fee, I have agreed to render le	egal service for all aspects of the bankruptcy case, including:
6.	p. Preparation and filing of any petition, schedules, statements of the Representation of the debtor at the meeting of creditors and compared to the second	onfirmation hearing, and any adjourned hearings thereof;
	С	ERTIFICATION
		y agreement or arrangement for payment to me for representation of the
	June 3, 2010	/s/ Brian E. Manning
	Date	Signature of Attorney
		Law Offices of Brian E. Manning
		Name of law firm

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	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
In re	☐ The presumption arises.
Patricia E. Jovine _{Debtor(s)}	
Case Number:	☐ The presumption is temporarily inapplicable.

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUMER DEBTORS
1A	If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
17.	☐ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 11 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
ПВ	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/
	I was released from active duty on, which is less than 540 days before
	this bankruptcy case was filed; OR
	b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION						
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.						
	a. 🗖 Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.						
	b. Married, not filing jointly, with declaration of separate households. By checking the penalty of perjury: "My spouse and I are legally separated under applicable non-bankrul living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of Complete only Column A ("Debtor's Income") for Lines 3-11.	w or my spou	se and I are				
2	c. Married, not filing jointly, without the declaration of separate households set out Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-		2.b above. Co	omplete both			
	d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Cofor Lines 3-11.	olumn	B ("Spouse	s Income")			
	All figures must reflect average monthly income received from all sources, derived during six calendar months prior to filing the bankruptcy case, ending on the last day of the most before the filing. If the amount of monthly income varied during the six months, you mustivide the six-month total by six, and enter the result on the appropriate line.	onth	Column A Debtor's Income	Column B Spouse's Income			
3	Gross wages, salary, tips, bonuses, overtime, commissions.		\$ 0.00	\$ N.A.			
4	Income from the operation of a business, profession or farm. Subtract Line b fro Line a and enter the difference in the appropriate column(s) of Line 4. If you operate m than one business, profession or farm, enter aggregate numbers and provide details on attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.	nore					
	a. Gross receipts \$ 0	0.00					
	b. Ordinary and necessary business expenses \$	0.00					
	c. Business income Subtract Line b from Line	а	\$ 0.00	\$ N.A.			
5	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero not include any part of the operating expenses entered on Line b as a deductio Part V.						
ŭ	a. Gross receipts \$	0.00					
	b. Ordinary and necessary operating expenses \$	0.00					
	c. Rent and other real property income Subtract Line b from Line	а	\$ 0.00	\$ N.A.			
6	Interest, dividends and royalties.		\$ 0.00	\$ N.A.			
7	Pension and retirement income.		\$ 0.00	\$ N.A.			
8	Any amounts paid by another person or entity, on a regular basis, for the house expenses of the debtor or the debtor's dependents, including child support paid that purpose. Do not include alimony or separate maintenance payments or amounts	d for					
	by your spouse if Column B is completed.	paid	\$ 0.00	\$ N.A.			
9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line However, if you contend that unemployment compensation received by you or your spouwas a benefit under the Social Security Act, do not list the amount of such compensation Column A or B, but instead state the amount in the space below:	use					
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ Spouse \$		\$	N.A.			

				1		† 	
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.						
	a.	\$	0.00				
	b.	\$	0.00				
	Total and enter on Line 10	-		\$	0.00	\$ N.A.	
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 tl Column A, and, if Column B is completed, add Lines 3 through 10 in Columtotal(s).			\$	0.00	\$ N.A .	
12	Total Current Monthly I ncome for § 707(b)(7). If Column B has bee Line 11, Column A to Line 11, Column B, and enter the total. If Column B completed, enter the amount from Line 11, Column A.			\$		0.00	
	Part III. APPLICATION OF § 707(b)	(7) E	EXCLUSIC	N			
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the arnumber 12 and enter the result.	nount	from Line 12 k	by the	\$	0.00	
14	Applicable median family income. Enter the median family income for household size. (This information is available by family size at www.usdoj the bankruptcy court.) a. Enter debtor's state of residence: Pennsylvania b. Enter debtor's	.gov/u	ist/ or from the	e clerk of	\$	44,396.00	
15	Application of Section 707(b)(7). Check the applicable box and procedure. The amount on Line 13 is less than or equal to the amount or not arise" box at the top of page 1 of this statement, and complete Figure 1. The amount on Line 13 is more than the amount on Line 14.	n Line Part VII	14. Check the	plete Part	s IV,	V, VI or VII.	

Complete Parts IV, V, VI and VII of this statement only if required. (See Line 15).

	Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707 (b)(2)		
16	Enter the amount from Line 12.	\$	N.A.	
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. a. \$ b. \$ c. \$			
	Total and enter on Line 17.			
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$	N.A.	
	Part V. CALCULATION OF DEDUCTIONS FROM INCOME			
	Subpart A: Deductions under Standards of the Internal Revenue Service	ce (IF	RS)	
19A	National Standards: food, clothing and items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$	N.A.	

	Out-of-l for pers clerk of under 6	al Standards: health care Pocket Health Care for pers sons 65 years of age or olde the bankruptcy court.) En 5 years of age, and enter in	ons under 65 ye er. (This informa ter in Line b1 tha n Line b2 the nu	ears of a ation is e numb mber o	age, and in Lir available at <u>w</u> er of member f members of	ne a2 the IRS Nation www.usdoj.gov/ust/ os of your household your household who	al Standards or from the who are are 65		
19B	Line 14l enter th 65 and	r older. (The total number b). Multiply line a1 by Line le result in Line c1. Multiply older, and enter the result er the result in Line 19B.	b1 to obtain a to y Line a2 by Line	otal am e b2 to	ount for house obtain a total	ehold members unde amount for househo	er 65, and Id members		
	House	ehold members under 65	years of age	Hous	ehold membe	ers 65 years of age	e or older		
	a1.	Allowance per member	N.A.	a2.	Allowance p	er member	N.A.		
	b1. Number of members N.A. b2. Number of members								
	c1.	Subtotal	N.A.	c2.	Subtotal		N.A.	\$	N.A.
20A	size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						\$	N.A.	
20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an								
	a. I	RS Housing and Utilities Sta	andards; mortga	ge/ren	tal expense	\$	N.A.		
		Average Monthly Payment f your home, if any, as state		cured b	У	\$	N.A.		
	C.	Net mortgage/rental expen	se			Subtract Line b from	m Line a	\$	N.A.
21	out in L the IRS	Standards: housing an ines 20A and 20B does not Housing and Utilities Stand, and state the basis for you	accurately comp lards, enter any	oute the additio	e allowance to nal amount to	which you are entitle	led under	\$	N.A.
		Standards: transporta							
		entitled to an expense allong a vehicle and regardless					e expenses of		
	Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.								
22A		1 2 or more.	•		•				
	Transp IRS Lo Metrop	checked 0, enter on Line 22 portation. If you checked 1 cal Standards: Transportationlitan Statistical Area or Centhe clerk of the bankrupto	or 2 or more, er on for the applic ensus Region. (T	nter on able nu	Line 22A the " umber of vehic	Operating Costs" am cles in the applicable	nount from	\$	N.A.
	Local	Standards: transporta	tion; addition	nal pul	olic transpo	rtation expense			
22B	If you p	pay the operating expenses a are entitled to an addition	for a vehicle and al deduction for	d also u your p	ise public tran ublic transport	sportation, and you tation expenses, ent	contend er on Line		
		e "Public Transportation" am e at <u>www.usdoj.gov/ust/</u> or					nount is	\$	N.A.
								I	

Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the *2 or more* Box in Line 23. Enter, in Line a below, the *Ownership Costs* for *One Car* from the IRS Local Standards: Transportation (available at www.usdoi.gov/uslz) or from the lefts of the bankruptcy court): enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs			 				
b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42. B. Average Monthly Payment for any debts secured by Vehicle 1. C. Net ownership/lease expense for Vehicle 1 Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the '2 or more' Box in Line 23. Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the '2 or more' Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at yeavusciol poy/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. The Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as retirement contributions, union dues, and uniform costs. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: childcare Enter the total average monthly amount that you actually challenged dehild. Enter the total average monthly amount that you actually challenged dependent c		number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) 1					
Local Standards: transportation ownership/lease expense; Vehicle 2. Subtract Line b from Line a. stated in Line 42	23	b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42;					
Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdaj.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of that Awerage Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42. In RS Transportation Standards, Ownership Costs "In the Complete County" in the Complete County in the Complete County in the Complete County in the County of that Awerage Monthly Payment for any debts secured by Vehicle 2. In Rowards Monthly Payment for any debts secured by Vehicle 2. In Rowards Monthly Payment for any debts secured by Vehicle 2. In Na. What are the vehicle 42. In Na. What Average Monthly Payment for any debts secured by Vehicle 2. In Na. What Average Monthly Payment for any debts secured by Vehicle 2. In Na. What Average Monthly Payment for any debts secured by Vehicle 2. In Na. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for any debts secured by Vehicle 2. What Average Monthly Payment for a Manual for a Manual for the Manual for average monthly payment for a physically or mentally challenged for any other form of insurance. Other Necessary Expenses: court-to-dered payments. Enter the total monthly amount that you actually expend for debts of the mount of the secure for a physically or mentally challenged dependent child for whom no public education providing similar services		a. IRS Transportation Standards, Ownership Costs \$ N.A.					
Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at wow.usid).gov/issl/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 24: a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42: c. Net ownership/lease expense for Vehicle 2 a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42: c. Net ownership/lease expense for Vehicle 2 d. Net ownership/lease expenses for Vehicle 2 d. Net ownership/lease expenses for Vehicle 2 d. Net ownership/lease expenses: Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment. such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401 (k) contributions. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged child. Enter							
anly if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a IRS Transportation Standards, Ownership Costs b Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42. c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life Insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and presc		c. Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a.	N.A.				
a. IRS Transportation Standards, Ownership Costs \$ N.A. b. Average Monthly Payment for any debts secured by Vehicle 2. c. Net ownership/lease expense for Vehicle 2 \$ Subtract Line b from Line a. 5 N.A. 25 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Cher Necessary Expenses: involuntary deductions for employment, Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Cher Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance. Enter total average monthly premiums that you actually pay for term life insurance. Cher Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Cher Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Cher Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include payments for health and welfare of yourself or your dependents, that is not reimbursed by in		only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b					
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C. Net ownership/lease expense for Vehicle 2 Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the		Average Monthly Payment for any debts secured by Vehicle 2,					
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actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and	26	average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as	\$ N.A.				
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amount that you actually pay for telecommunication services other than your basic home telephone and	31	actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings					
the extent necessary for your health and welfare or that of your dependents. Do not include any	32	amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any	\$ N.A.				
Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32 \$ N.	33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32	\$ N.A.				

		Subpart B: Additional Expense Deduction Note: Do not include any expenses that you ha		2.	
	monthl	h Insurance, Disability Insurance and Health Savings A y expenses in the categories set out in lines a-c below that are reasonuse, or your dependents.			
	a.	Health Insurance	\$ N.A.		
	b.	Disability Insurance	\$ N.A.		
34	C.	Health Savings Account	\$ N.A.		NI A
	Tot	al and enter on Line 34.		\$	N.A.
	lfy	vou do not actually expend this total amount, state your actual ace below: N.A.	average expenditures in the		
35	averag suppor	nued contributions to the care of household or family re actual monthly expenses that you will continue to pay for the reaset of an elderly, chronically ill, or disabled member of your household who is unable to pay for such expenses.	onable and necessary care and	\$	N.A.
36	expens Preven	ction against family violence. Enter the total average reasonates that you actually incurred to maintain the safety of your family untion and Services Act or other applicable federal law. The nature of the tonfidential by the court.	nder the Family Violence	\$	N.A.
37	IRS Lo	e energy costs Enter the total average monthly amount, in excest cal Standards for Housing and Utilities that you actually expend for hele your case trustee with documentation of your actual expensionstrate that the additional amount claimed is reasonable and it	nome energy costs. You must ses, and you must	\$	N.A.
38	expens elemer provid	ation expenses for dependent children less than 18. Ent ses that you actually incur, not to exceed \$147.92* per child, for attentary or secondary school by your dependent children less than 18 years your case trustee with documentation of your actual expensions amount claimed is reasonable and necessary and not alread ards.	endance at a private or public ears of age. You must ses and you must explain	\$	N.A.
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				N.A.
40		nued charitable contributions. Enter the amount that you w m of cash or financial instruments to a charitable organization as def (2)		\$	N.A.
41	Total	Additional Expense Deductions under § 707(b). Enter the	e total of Lines 34 through 40.	\$	N.A.

^{*}Amount subject to adjustment on 4/1/2013, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42. Name of Creditor	
Monthly Include taxes Payment	
Other payments on secured claims. If any of the debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support of the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. S Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. S Calcal S Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filling. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. A Projected average monthly Chapter 13 plan payment. S N.A. Current multiplier for your district as determined under schedules issued by the Executive Office for United States	
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the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. a. Projected average monthly Chapter 13 plan payment. \$ N.A. Current multiplier for your district as determined under schedules issued by the Executive Office for United States	N.A.
Current multiplier for your district as determined under schedules issued by the Executive Office for United States	
b. schedules issued by the Executive Office for United States	
Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X N.A.	
C. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b	N.A.
46 Total Deductions for Debt Payment. Enter the total of Lines 42 through 45. \$	N.A.
Subpart D: Total Deductions from Income	
Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.	

	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION							
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))							
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$	N.A.					
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.							
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.							
	Initial presumption determination. Check the applicable box and proceed as directed.							
	The amount on Line 51 is less than \$7,075*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.							
52	☐ The amount set forth on Line 51 is more than \$11,725*. Check the "Presumption arises" box at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.							
	The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the Part VI (Lines 53 through 55).	e remaino	ler of					
53	Enter the amount of your total non-priority unsecured debt							
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.							
	Secondary presumption determination. Check the applicable box and proceed as directed.	•						
	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presu	mption do	es					
55	not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. The amount on Line 51 is equal to or greater than the amount on Line 54. Check the	hay far "T	he					
	presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. Y							
	complete Part VII.							
	Part VII: ADDITIONAL EXPENSE CLAIMS							
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.							
56	Expense Description Monthly A	Amount						
56	a. \$	N.A.						
	b. \$	N.A.						
	c. \$	N.A.						
	Total: Add Lines a, b and c	N.A.						
	Part VIII: VERIFICATION							
I declare under penalty of perjury that the information provided in this statement is true and correct. (If this a joint case both debtors must sign.)								
	Date:							
57	Date Obetor)							
	Date: Signature:							
	(Joint Debtor, if any)							

^{*}Amounts are subject to adjustment on 4/1/2013, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Income Month 1			Income Month 2		
Gross wages, salary, tips	0.00	0.00	Gross wages, salary, tips	0.00	0.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 3			I ncome Month 4		
Gross wages, salary, tips	0.00	0.00	Gross wages, salary, tips	0.00	0.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 5			Income Month 6		
Gross wages, salary, tips	0.00	0.00	Gross wages, salary, tips	0.00	0.0
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.
Addit	ional Ite	ems as	Designated, if any		

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CITIFINANCIAL WB 695 KIDDER STREE SUITE 2 WILKES-BARRE PA 18702-6938

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NV ENERGY PO BOX 30086 RENO NV 89520-3086

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